## **Healthy Incentives<sup>SM</sup> Paper Request Form**



Complete and return this form to:

King County Benefits, Payroll and Retirement Operations The Chinook Building, CNK-ES-0240 401 Fifth Ave. Seattle, WA 98104 Phone: 206-684-1556 Fax: 206-296-7700

Email: kc.benefits@kingcounty.gov

401 Fifth Ave, Seattle, WA 98104								
Please send: Paper wellness assessment (mail only)					Paper individual action plan (two options)			
Indicate how you would like to receive your paper individual action plan, if selected:								
☐ Please send my paper individual action plan to the mailing address below. I understand I will receive it in about a week, along with a postage-paid envelope to use when returning my Activity Log. ☐ Please send a PDF of my paper individual action plan to the email address below. I understand I will receive it								
in a few days and will need to provide my own envelope and postage when returning my Activity Log.								
Please print clearly.								
ricuse print cicuriy.					PeopleSoft employee ID: 0000			
Employee name:					Healthy Incentives <sup>SM</sup> ID:			
Mailing address:							Apt:	
City:				State:	State:		ZIP:	
Home phone:	Cell:					Work:		
(required)	Email:							
		Mailing address above is different than address in PeopleSoft.						
Spouse/domestic partner name:					Healthy Incentives <sup>SM</sup> ID:			
Mailing address:							Apt:	
City:				State:			ZIP:	
Home phone:	Cell:				Work:	Work:		
(required)	Emai	il:						
For Benefits, Payroll and Retirement Operations use only								
Date form requested		Date form received		Form received by		Date IA	Date IAP mailed/emailed	
Comments / notes								